



Name of Debtor APCSC, LLC

Case No. \_\_\_\_\_

B5 (Official Form 5) (12/07) - Page 2

**TRANSFER OF CLAIM**

☐ Check this box if there has been a transfer of any claim against the debtor by or to any petitioner. Attach all documents evidencing the transfer and any statements that are required under Bankruptcy Rule 1003(a).

**REQUEST FOR RELIEF**

Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition. If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.

Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X John Libby, SUPERVISOR  
Signature of Petitioner or Representative (State title)

Chicago Regional Council of Carpenters 8/2/09  
Name of Petitioner Date Signed

Name & Mailing John Libby/Contributions Department  
Address of Individual Pension Fund  
Signing in Representative 12 E. Erie Street  
Capacity Chicago, IL 60611

X Bruce C. Scalabrino 8/4/09  
Signature of Attorney Date

Bruce C. Scalabrino  
Name of Attorney Firm (If any)  
Scalabrino & Arnoff, LLP  
One North LaSalle Street  
Suite 1600  
Chicago, IL 60602  
Address  
Telephone No. 312-629-0545

X John Libby, SUPERVISOR  
Signature of Petitioner or Representative (State title)

Chicago Regional Council of Carpenters 8/2/09  
Name of Petitioner Date Signed

Name & Mailing John Libby/Contributions Department  
Address of Individual Welfare Fund  
Signing in Representative 12 E. Erie Street  
Capacity Chicago, IL 60611

X Bruce C. Scalabrino 8/4/09  
Signature of Attorney Date

Bruce C. Scalabrino  
Name of Attorney Firm (If any)  
Scalabrino & Arnoff, LLP  
One North LaSalle Street  
Suite 1600  
Chicago, IL 60602  
Address  
Telephone No. 312-629-0545

X John Libby, SUPERVISOR  
Signature of Petitioner or Representative (State title)

Chicago Regional Council of Carpenters 8/2/09  
Name of Petitioner Date Signed

Name & Mailing John Libby/Contributions Department  
Address of Individual Apprentice and Trainee Program Fund  
Signing in Representative 12 E. Erie Street  
Capacity Chicago, IL 60611

X Bruce C. Scalabrino 8/4/09  
Signature of Attorney Date

Bruce C. Scalabrino  
Name of Attorney Firm (If any)  
Scalabrino & Arnoff, LLP  
One North LaSalle Street  
Suite 1600  
Chicago, IL 60602  
Address  
Telephone No. 312-629-0545

**PETITIONING CREDITORS**

Name and Address of Petitioner Chicago Regional Council of Carpenters Pension Fund 12 E. Erie Street Chicago, IL 60611	Nature of Claim Unpaid pension fund contributions	Amount of Claim  54,298.54
Name and Address of Petitioner Chicago Regional Council of Carpenters Welfare Fund 12 E. Erie Street Chicago, IL 60611	Nature of Claim Unpaid welfare fund contributions	Amount of Claim  99,669.24
Name and Address of Petitioner Chicago Regional Council of Carpenters Apprentice and Trainee Program Fund 12 E. Erie Street Chicago, IL 60611	Nature of Claim Unpaid apprentice and trainee program fund contributions	Amount of Claim  3,458.49
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims  157,426.27

0 continuation sheets attached